

Exhibit A-2

Second UCC

THIS SPACE FOR USE OF FILING OFFICER

00-526094

06/23/2000 11:00 AM

Texas Secretary of State

FILED

**FINANCING STATEMENT — FOLLOW INSTRUCTIONS CAREFULLY**

This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional) B. FILING OFFICE ACCT. # (optional)

C. RETURN COPY TO: (Name and Mailing Address)

L. E. Brizzolara, III
 McCall, Parkhurst & Horton L.L.P.
 717 North Harwood
 9th Floor
 Dallas, Texas 75201

D. OPTIONAL DESIGNATION (if applicable): LESSOR/LESSEE CONSIGNOR/CONSIGNEE NON-UCC FILING

1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b)

1a. ENTITY'S NAME
 Christian Care Centers, Inc.

OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

1c. MAILING ADDRESS CITY STATE COUNTRY POSTAL CODE
 1000 Wiggins Parkway Mesquite TX US 75150

1d. S.S. OR TAX I.D.# OPTIONAL ADD'L INFO RE ENTITY DEBTOR 1e. TYPE OF ENTITY 1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION 1g. ENTITY'S ORGANIZATIONAL I.D.#, if any NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b)

2a. ENTITY'S NAME
 OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

2c. MAILING ADDRESS CITY STATE COUNTRY POSTAL CODE

2d. S.S. OR TAX I.D.# OPTIONAL ADD'L INFO RE ENTITY DEBTOR 2e. TYPE OF ENTITY 2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION 2g. ENTITY'S ORGANIZATIONAL I.D.#, if any NONE

3. SECURED PARTY'S (ORIGINAL S/P OR ITS TOTAL ASSIGNEE) EXACT FULL LEGAL NAME - insert only one secured party name (3a or 3b)

3a. ENTITY'S NAME
 Chase Bank of Texas, National Association, as trustee

OR 3b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

3c. MAILING ADDRESS CITY STATE COUNTRY POSTAL CODE
 600 Travis, Suite 1150 Houston TX US 77002

4. This FINANCING STATEMENT covers the following types or items of property:

The Gross Revenues (as defined in the Master Trust Indenture dated as of September 15, 1996 (the "Master Indenture") as supplemented by Supplemental Indenture Number 2 between Secured Party and Debtor) of the Obligated Group Members (as defined in the Master Indenture), all moneys and securities from time to time held by the Secured Party under the terms of the Master Indenture and any and all other real or personal property of every name and nature from time to time hereafter by delivery or by writing of any kind conveyed, mortgaged, pledged, assigned or transferred, as and for additional security hereunder by the Obligated Group Members, or by anyone on their behalf or with their written consent, to the Secured Party.

5. CHECK ☐ This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required] 7. If filed in Florida (check one) ☐ Documentary stamp tax paid ☐ Documentary stamp tax not applicable

6. REQUIRED SIGNATURE(S) Christian Care Centers, Inc. 8. ☐ This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS Attach Addendum if applicable

9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) (ADDITIONAL FEE) (optional) ☐ All Debtors ☐ Debtor 1 ☐ Debtor 2

[Signature]
 President and Chief Executive Officer

THE ODEE COMPANY, P.O. BOX 550488, DALLAS, TEXAS 75255 - 214-340-0415 - 800-486-8333